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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

## In Re Application of

Applicant : Robert M. Silverman  
Serial No. : 09/945,172  
Filed : 31 Aug 2001

Examiner : David Yiuk Jung  
Art Unit : 2134

Entitled : SYSTEM AND METHOD FOR THE  
DETECTION OF AND REACTION TO  
DENIAL OF SERVICE ATTACKS [as  
amended]

Docket No. : END920000185US1

Commissioner For Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

## CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that the following attached  
correspondence comprising 24 pages:

CERTIFICATE OF FACSIMILE TRANSMISSION	1 page
FEE TRANSMITTAL	1 page
AMENDMENT	22 pages

is being facsimile transmitted by me to the United  
States Patent and Trademark Office at 571-273-8300, on  
the date below.

SHELLEY M BECKSTRAND

Date: 1 Mar 2006



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**FEE TRANSMITTAL for FY 2005**  
(Large Entity)

TOTAL AMOUNT OF PAYMENT: 0

Application Number 09/945,172  
Filing Date 31 Aug 2001  
First Inventor Robert M. Silverman  
Art Unit 2134  
Attorney Docket END920000185US1

**METHOD OF PAYMENT**

- ☐ IBM Deposit Account 09-0466  
☐ Check  
☐ Charge fee(s) indicated below  
☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  
☐ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES:**

Application Type	FILING FEES Fee(\$)	SEARCH FEES Fee(\$)	EXAMINATION FEES Fee(\$)	Fee Paid(\$)
Utility	300	500	200	0
Reissue	300	500	600	0
Provisional	200	0	0	0

**2. EXCESS CLAIM(S) FEES**

Fee Description

Each claim over 20 or, for Reissues, over 20 and more than in the parent patent  
Each independent claim over 3 or, for Reissues, more than in original

	Extra Claims	Fee(\$)	Fee Paid (\$)
Total Claims - or HP = 0	0	x \$ 50 =	0
Indep Claims - or HP = 0	0	x \$ 200 =	0
Mult Dep Claim			0

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 for each additional 50 sheets or fraction thereof. (35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).)

Total sheets	Extra Sheets	Number of Additional 50	Fee(\$)	Fee Paid (\$)
- 100 =		x	\$250	0

**4. OTHER FEES**

Non-English Specification

Other:

\$130 0

**SUBMITTED BY**

Signature

*Shelley M Beckstrand*

Date

1 Mar 2006

Name

Shelley M Beckstrand  
Registration No. 24,886  
Telephone 276 238-1972

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AMENDMENT

Honorable Commissioner  
for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Responsive to the Office action of 2 Dec 2005, please  
amend the above-identified application as follows:

END920000185US1

1 of 22

S/N 09/945,172